. ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITIO: | INITIALS | ID NO. | DATE | | | | |
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| FEE DETERMINATION | | | | | | | |
| O.I.P.E. CLASSIFIER | | 2/3 | 5/21/01 | | | | |
| FORMALITY REVIEW | BZ | TC3.883 | 06-26-01 | | | | |
| RESPONSE FORMALITY REVIEW | JK | 835 | 10/04/01 | | | | |
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INDEX OF CLAIMS

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